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FEDERAL PARTICIPATION IN A HEALTH PROGRAM FOR SCHOOLS

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There is at least one subdivision of the federal government that can never be accused of trying to take over the affairs of the states. The Child Hygiene Section of the United States Public Health Service never goes to a party without being invited, and after the party is over it goes back home. Its relation to states and institutions, to boards of health and boards of education, is in no sense paternal; it acts rather as the big brother putting his shoulder to the wheel when necessary, or giving a lift where it will help most.

During the past fiscal year the Child Hygiene Section operated in ten states and the District of Columbia. Its work consisted of investigation of health conditions and of assistance in the organization of child-hygiene divisions in state departments of health; a study of dependency, delinquency, and mental defect; studies in feeding and nutrition; mental and physical examination of children brought before a juvenile court; medical inspection of schools; and studies in oral hygiene. A large part of this work was done in the schools.

In all of the lines of public-health work there is none with larger promise than that carried on in the schools. Health education of children is fundamental in any scheme for advancing the health of a nation. Unless people are taught to take care of their own health and to do their part in caring for the health of their neighbors, no generation can be expected to be healthier than the one before it. Men are not born with the knowledge that the *Anopheles* mosquito is responsible for the spread of malaria, that a too strenuous life may end prematurely with a degenerated heart, kidneys, or arteries, or that good teeth make for efficiency. And it is a rather hopeless task teaching these things to adults. A man

may flick the flies from his horse for sixty years and then be told that these insects may carry typhoid fever. He will still look upon them as "pesky critters" that annoy his stock, and will more than likely consider screens for the kitchen an unnecessary luxury. A health conscience, as well as a health consciousness, must be created, and educators know better than any other class of people that during childhood is the best time to accomplish this.

Compulsory education laws tend to bring all the children of designated age groups into the schoolhouses, so that here is the one time and place where the next generation may be reached. Such an opportunity to lay a firm foundation of personal and national health should not be neglected. Can anyone doubt that Johnny Jones's efficiency, either as a captain of industry or as president of the republic, will be multiplied many times by building a sound foundation of health for his future attainments in business or statecraft? It should be clearly understood, moreover, that no state has a moral right to pass compulsory-education laws without at the same time providing for adequate health supervision. In this respect the state owes a clearly defined duty to the child, the parent, and the taxpayer. It is morally wrong to force a child to go to a school where unhygienic conditions of his environment or the inadequacy of his instruction may aggravate any physical or mental defect. It is unfair to parents to lead them to think that their children are being prepared adequately to weather the storm and stress of the high seas of life when many of them are physically fit only for the shallows of the smoothest pond. It is likely to bring down upon the administrative authority the wrath of the indignant taxpayer when he finds that he has to pay the cost of carrying a child two or three years in the same grade, when an adequate health program might have discovered and led to the correction of the defect which is causing his retardation.

The question of the administrative authority under which the health supervision of school children should be placed is one upon which there may justly be more than one opinion. In some quarters the department of education is considered the proper administrative authority; in others, it is felt that the department of health should be charged with the administration of this work.

It is the duty and function of a department of health to look after the health of the whole community, and school children are certainly a part of the community. In the majority of communities the board of health has mandatory powers with regard to the abatement of nuisances and the control of communicable diseases. For example, only the board of health could compel a recalcitrant school board (if there be any such) to correct a condition in school building or grounds dangerous to the health of the pupils. It is manifestly impossible to separate the health problems of approximately 20 per cent of the population from the population as a whole.

However, it must be remembered that no work in the schools can be done efficiently if there is no responsibility devolving upon the constituted school authorities. This is simply a fundamental principle of good administration. The teacher is the pivot on which the success of the work is hinged, and she cannot serve two masters. In view of these facts, it would seem that the best results of health work in the schools can be obtained only under the joint administrative authority of the educational and health departments.

The two great outstanding needs of the present day in the matter of health work in the schools are, first, a co-ordination of the work of the departments of health and education and, second, the better training of teachers in personal and community health. Under present economic conditions, both are essential if the products of the schools are to be healthy citizens with an ingrained health consciousness that will not only make for the healthful living of the individual, but will also consider the general promotion of the public health as part of the duties of good citizenship.

Any division of health organized in a department of education without the combined educational and public-health points of view will fall short in some respect. It is particularly true that in this era of readjustment no department touching closely the national life can afford to function with a narrow-gauge organization. A specialist in one particular line of school-health work—be it medical inspection, health education, sanitation, physical training, the control of communicable diseases, schoolhouse construction, nutrition classes, school nursing, clinics, or mental retardation—is not properly equipped to organize and set in motion

the machinery of a modern health division in a school system. The broad scope of the work must be visualized in the beginning if the result is to be symmetrical.

The necessity for such an organization of a school-health program can scarcely be questioned either by school men or health officials. Practically the only problem to be solved is the finding of suitable organizers. Trained personnel with experience in both educational and public-health work are scarce. It is admitted that the supply is far short of the demand which would be created by the adoption of such a program by even a small percentage of the school systems of the country. If any school system wished to inaugurate or reorganize work along these lines, there would seem to be no valid reason why the federal government, if requested, should not investigate this phase of child hygiene in the given locality and assist the state in organizing the work on the basis best suited to the promotion of the health in that community. A carefully directed mobilization of all the resources of a state and recommendations as to the inclusion of desirable features not already existent would go far toward giving school children the health protection they require. No right of the public is more to be respected than its right to the promotion and protection of its health. On the other hand, few assets of the state are of more value than the health of its people, and when approximately 20 per cent of the population is involved it is no small matter. In cases such as these it would seem that the federal government should not permit the public health to suffer if its aid is requested by the local community or institution with the indorsement of the educational and health authorities of the state.

However, no matter how wisely and well a school-health program is planned, its success will depend largely upon the individual teacher. Every school superintendent knows the difficulty of carrying through any movement without the intelligent co-operation of his teaching body. How much real progress was made in state departments of education during the war when the teachers left the schools in droves and untrained recruits took their places? The earnest, enthusiastic efforts of a well-trained teacher,

properly directed, are among the most important forces making for national health.

The medical inspector and school nurse can spend comparatively little time in any one class or with any one group of children; and in some localities these are unknown. Where such service exists the co-operation of an intelligent, well-trained teacher greatly augments the value of the work. Without such co-operation the difficulties are multiplied. Neither the doctor nor the nurse has such an opportunity as the teacher to observe defects and habits that militate against the child's well-being. Careless, unsanitary habits, not always in evidence when "company" is present, crop out in the daily routine. Bits of information concerning the child's life outside of school inevitably reach the teacher. All of these form the basis of effective health work.

Many teachers now in the schools who are willing and anxious to help build up a vigorous, healthy people are unfit for the task because of their lack of training. They are struggling toward an ideal they have never fully visualized. This lack of training has naturally resulted in a lack of interest in health work among a large number of the teachers. They cannot be expected to take much interest in a subject of which they know little.

According to statistics published by the United States Bureau of Education in 1920, "58 per cent of the teachers of the United States are trying to teach their pupils to care for their health." This leaves a very large proportion of the pupils of the country without such instruction; and among the 58 per cent of teachers who are attempting this work, it can be safely stated that a large proportion are not adequately trained. The modern conception of hygiene is a comparatively recent development, and relatively few educational systems properly train their teachers in this respect. The lawmakers are waking up to the fact that something is wrong with the health situation in the schools, and five states have adopted laws requiring that teachers and pupils be given instruction leading to the prevention of communicable diseases. The character of such instruction should be most carefully considered. The state medical societies of thirty-two states have indicated their purpose to

appoint committees on health in the public schools to co-operate with the state teachers' associations. Some state educational systems have adopted admirable health programs.

All along the line there is a growing recognition of the importance of the teacher's place in this work and that it is just as important that she be trained in matters of health as in methods of teaching reading or arithmetic. A child is sent to school not only to learn the three R's, but also to be prepared to make the most of his life. The teaching of the ways and means of maintaining health might be called vocational training in the broadest sense. The mere matter of living is the vocation of all of us for a greater or less number of years, and the better trained we are the more of a success will we make of it.

If the public health is to be very materially advanced in the reasonably near future, health work among children from six to eighteen years of age must be regarded as essential. In this work the teacher occupies a strategic position. It logically follows that every normal school and college or other institution in the country attempting teacher training should establish courses in modern hygiene. There is a far cry between the conception of hygiene of today and that of even our fathers' time. We do not give so much time to quibbling about the exact time and temperature of our bath, but more to a study of all the means of keeping our bodies and minds strong and resistant, to the measures that prevent disease, and to the prevention and correction of physical and mental defects.

Again the question arises: Are there enough properly qualified teachers to fill this need? There can be no doubt that the answer is negative because of the broad nature of the necessary qualifications. Those who are experts in only one phase of health work are apt to emphasize that phase and minimize other phases of equal importance. The schools of hygiene and public health are turning out some graduates each year, but the number throughout the country is still small. With teachers of sundry and various qualifications evolving their own courses of study in many instances, much of this work must be practically valueless.

Here is another field in which the federal government might come to the aid of the people. It is highly important that instruction in health supervision of school children should be standardized. No teacher-training institution should be given a Class A rating if its courses in health education do not conform to at least a minimum standard. A year's work in this subject should have just as definite a meaning as a year's work in mathematics, or psychology, or education. The federal government might very reasonably be asked and expected to assist the educational leaders in the states in this standardization. Such co-operation would result in giving aid where it is badly needed.

It should be clearly understood that co-operation of this kind is in no sense a taking over of the duties and functions of the states. It is simply a bridging over of a gap that should cease to exist just as soon as training in health work is considered as important and becomes as universal as training in English or any other branch of the curriculum. There cannot be a very widespread difference of opinion as to the relative importance of knowing the simple rules of personal and community health and of being able to extract the cube root. I was taught how to find the cube root and forgot it long since. Looking back on my career since then I cannot see that this particular lapse of memory has been any handicap to me. But the nation recently found out that many of its citizens were handicapped by lack of proper health supervision in childhood. The parents, the state, and the nation have every right to demand that the children be taught how to keep themselves well and to protect the health of the community. It does not pay to educate a race of weaklings. The return on the investment is too low.